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A NEW AND ACCURATE METHOD
FOR
DIAGNOSING
PULMONARY CONSUMPTION:

BEING

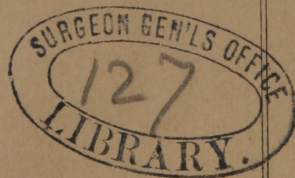
A Treatise on the Faecal Symptoms,

DISCOVERED AND ARRANGED BY

DANIEL WHITE, M. D.,

Member of the N. H., N. Y. and Mo. Medical Societies; late Editor and Publisher of the "Medical Investigator," and other Medical Journals.

GIRARD, ILLINOIS.



SPRINGFIELD:
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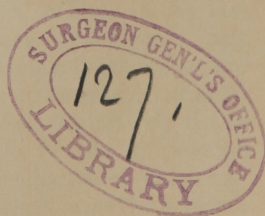
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CONSUMPTION.

We are well aware that the introduction of any thing new in medical science, will be subjected to the most severe scrutiny, especially if it conflicts with time honored notions, or individual interests.

In giving publicity to a discovery which we made more than twelve years ago, and one which our experience has fully confirmed, in private practice during this long period, we do not fear the severest scrutiny, coming from what source it may. Being convinced not only of its truth, and immense practical value to suffering humanity; but ultimate triumph over any and all other diagnostic signs heretofore discovered for detecting pulmonary phthisis, it will fortify us against the sarcasms of the ignorant and prejudiced that may censure us. Being based upon facts, its application is only required to demonstrate its utility. All we ask is a candid investigation, and we are willing to leave it with an intelligent public to pass their verdict, and abide its decision.

While this discovery will enable any one with the most limited knowledge to detect a disease upon the pulmonary organs, it will nevertheless require studious application, and not a little experience to describe their true condition in every respect.

There is no means heretofore known whereby pulmonary phthisis could be detected in its incipient stages, and this is the principal reason why it has proved so universally fatal. There is no necessary reason why this disease should be attended with fatal results, any more than a similar disease upon any other organ in the body—the medical profession have abundance of means at their command which enables them to detect phthisis in its last stages, but at this stage, were a similar disease located upon any other organ, it would be equally incurable. Hence these means are of no practical value to the physicians, or their unfortunate patients.

I do not wish to be understood as condemning, or entirely doing away with all other methods for diagnosing the disease in question—although they fail to admonish us of the existence of consumption in its incipient stages, they are nevertheless useful monitors assisting us in our diagnosis so far as they go. The old and established symptoms are so well known, especially to the profession, as to render it not only unnecessary, but superfluous to append them here; my object being rather to add to the facts already col-

lected, than to supercede them. I confidently believe that my discovery is of more importance and practical value to mankind than any and all others of this age, and when once universally understood by physicians and the people, pulmonary consumption will be as rarely seen as at any remote period in the world's history.

My discovery is based upon the altered appearance of the Mucous membrane, of the fauces or throat. By observation it will be seen that this membrane undergoes various changes, in color and other appearances, just in proportion to the extent and severity of chronic irritation upon the lungs. It seems that Providence has wisely ordained these symptoms that we might be able, by observation and experience, to learn the actual condition of the pulmonary tissues. It is unnecessary for us to explain the "whys and wherefore's" of these changes in this little sheet—it is well known that certain appearances of the tongue indicate the condition of the stomach and other organs—at some remote period in the history of medicine, cognizance was taken of this fact, and the experience of after generations confirmed and perfected these once new diagnostic signs. My notice was attracted to these faecal symptoms more than twelve years ago, and from daily observation from that time to the present I have not had occasion to even doubt its correctness. I am well aware that I have not by any means reduced them to perfection in every respect, but enough may be gleaned to enable any one to detect a diseased from a healthy lung. With regard to the various appearances this membrane may assume in the different stages of pulmonary phthisis, I am also aware that there is a field open for improvement—and to render it perfect in every respect may require years of practical observation and experience—yet by carefully observing the various changes pointed out in this pamphlet it will enable the physician to satisfy himself sufficiently for all practical purposes. The physician will be doubtless surprised at the frequency with which he will encounter these symptoms among the patients under his charge, many of which may be affected with other diseases, that will prove to be the immediate cause of their death. Many persons afflicted with pulmonary consumption often die with some other acute disease. According to late statistics, one out of every six that die, taking Europe and America together, are from diseased lungs alone; therefore if he should find that one out of every six or eight of his patients had the symptoms herein described, he should not doubt the existence of pulmonary derangement in some form.

For convenience of description pulmonary consumption has been divided into three stages, between these no line of demarkation is

accurately known, and, in truth, does not exist, and therefore the various changes which occur in phthisis is but one continuous chain of abnormal phenomena, modified only by the constitutional condition, habits, climate, and the medical treatment the invalid receives.

THE FIRST STAGE.—The first symptom that indicates pulmonary phthisis, may be seen by examining the "*Fauces*," or back part of the throat, the mucous membrane covering those organs, presents a peculiar whitened appearance, occupying a space above and below the "*uvula*." The alteration at first is very slight, resembling a kind of fog, through which a slightly reddish appearance may be observed. As the disease advances, the coating of this membrane becomes thicker, and presenting more of a snow white aspect, and at the same time extends over a greater surface of the fauces. The above symptom indicates simply a chronic irritation of the pulmonary organs, and is generally the only symptom that denotes any constitutional or local derangement. These symptoms are present for weeks, or months, and sometimes for years, before any others known to the medical profession manifest themselves.

At this stage of the complaint, the recuperative powers of nature will often, no doubt overcome the disease in young and otherwise healthy subjects, as it does similar diseases upon other organs in the body, but to depend entirely upon unassisted nature, to say the least, would be extremely hazardous—like the viper in the wall, it might depart from your premises without leaving its deadly sting, but it would be much safer to destroy the reptile while in your power. In this stage of the disease, where there is no constitutional predisposition to consumption, very little medication will be required to restore the patient to a healthy condition, and when this is accomplished, the above symptoms will disappear, and the throat will present a natural and healthy appearance. But so long as the fauces present the appearance which we have described, just so long is the person in danger of pulmonary consumption and premature death.

From this thin and snowy white appearance, peculiar to the incipient stages of this complaint, as the disease progresses, the coating of the fauces becomes gradually thicker, and assumes a little darker appearance, and extending higher up towards the palate, and in some instances assumes rather of a grayish color, in others slightly tinged with yellow; in short these symptoms are more plainly manifested in every respect, until the disease has reached what we may term the

SECOND STAGE.—The length of time occurring between the first and second stages, will depend wholly upon the rapidity with which

the disease progresses, or runs its course, when affecting different individuals—in some persons this disease proves fatal in a few weeks in others it progresses so slow that months and years elapse before it terminates in death. In this stage of the complaint, the fauces present in addition to the peculiar color, a kind of furred, and if the disease is progressing rapidly, sometimes a darkish red, or inflamed appearance. Usually at this stage of the disease, the back part of the tongue is more or less coated, with large “pappillia” about its roots, (yet the appetite in a majority of cases is unimpaired,) the fauces in most cases assume a slightly cream colored aspect, and as we before remarked, all the symptoms are more plainly indicated in every respect, until the third and last stage is fully developed. In most cases the disease is curable in the second stage if proper treatment is applied. Much will however depend upon the perseverance of the patient and his friends, and the treatment pursued by the physician. Unassisted nature never will overcome the disease when advanced to this state, and the most judicious treatment will sometimes fail to restore the patient to health and strength. Many patients arrive at this stage of phthisis without any of those harassing symptoms so familiar to almost every one who has witnessed the slow and insidious progress of this dreadful disease. Such as coughs, night sweats, pain in the sides, breast, and shoulders, etc., etc., and even the stethoscope, in the most practiced and skillful hands, may fail to reveal any disease upon the lungs. But whether the last mentioned symptoms are present or otherwise, it will require every possible effort of the physician and patient to prevent a fatal issue. Let no one whose throat presents the appearance described under the second stage, delay for a moment, but procure the best medical advice within your command, for without judicious advice, appropriate and persevering treatment, pulmonary consumption will put an end to your earthly existence.

THE THIRD AND LAST STAGE.—In this stage of the disease the fauces assume a peculiar yellowish or cream-colored appearance, and at the same time the coating on this membrane is somewhat thicker than in the second stage, and extending down the throat as far as the eye can see, and up to, and covering the palate, or in other words the whole back part of the mouth and throat presents a slimy or glazed appearance of a light yellowish color. Whenever the above mentioned symptoms are seen upon the fauces, no matter how favorable the invalid's symptoms may be in every other respect, they surely indicate an incurable disease upon the pulmonary organs. We have witnessed hundreds of cases during the last twelve years, where the above described symptoms were manifested, and have never been able to effect a radical cure in any case, neither have we

witnessed one performed by any other physician, or with the so much talked of improvements of the day. Yet we have cured hundreds who were afflicted with a racking cough, and expectorated large quantities of matter from the chest, and suffered more or less pain in the sides, breasts, and shoulders, and night sweats, swollen ankles, etc., but in all these cases the fauces presented almost a natural appearance in every respect. It is, however, proper to remark that in a majority of cases, where the fauces present the appearance described in the third stage of this complaint, most of the other symptoms so familiar to the profession are also manifested.

We have endeavored to point out the symptoms as they appear in the progress of pulmonary phthisis, in a manner that we might be correctly understood by all, and although we may not have delineated its appearance as it occurs in the different stages, so minutely and accurately as would be desirable, yet enough may be gleaned from the description here presented, together with personal observation, for all practical purposes, and we will therefore conclude by saying that a white, or coated appearance of the fauces, always indicates pulmonary derangement, and that as this coating increases in thickness and color, the disease advances, or in other words the fauces is a kind of mirror by which we can accurately judge of the condition of the pulmonary tissues.

MODE OF EXAMINATION.—In order to examine a patient correctly, it should be done in the day-time; any other but a natural light is not to be depended upon. We never pretend to examine a patient by candle or gas light, the reflection of light is not so natural. It is true we might be able to distinguish a healthy, from a diseased condition, especially in a well marked case, but to ascertain what condition the lungs were in, would be a very doubtful experiment. We endeavor to seat the patient by the side of a window, so that the light will rest directly upon the fauces, and press down the tongue with the handle of a table spoon, by which means we have a good view of those organs. As soon as a person becomes a little familiar with these faucal symptoms, he will be able to diagnose a case to his own satisfaction, almost instantly, without any of the ceremony above alluded to.

ITS TREATMENT.—Duty to our fellow beings forbids our sending this little sheet before the public without adding a word of advice in relation to the treatment of this too often fatal disease.

In the incipient stages, a mild course of constitutional treatment only will be required; and in most cases local treatment proves disastrous. In the second stage—here too constitutional treatment must be relied upon chiefly, in effecting a cure. In some instances remedies which have a more specific action upon the lungs may be

required. But here let me enter my solemn protest against the use of any and all quack nostrums of the day, which purport to cure this disease—they will not only fail to give any permanent relief, but will hurry you out of existence much sooner than without any medicine being taken. All relaxing medicines heretofore so popular, invariably add to, rather than diminish the disease, if continued for any length of time. Debility is the most formidable symptom that the physician is called to combat in this complaint—all relaxants are debilitating, and their general use must be avoided. All instruments used for inhalation may with propriety be placed on a scale with patent medicines; and let me here warn one and all, who have the symptoms described in this pamphlet, to avoid their use, or trifling with them in any respect, as they would a rattlesnake. Possibly they might afford temporary relief, but their use will prove as fatal to you as the bite of the most venomous serpent.

I did not purpose in this little sheet to dictate to any one what course of treatment to pursue, but rather to show how the disease might be detected, and leave my readers to adopt such a course of treatment as their judgment might suggest. But this may fall into the hands of many who are not physicians. I will conclude by adding—that as mankind differ in their physical organizations, temperaments, etc., so their treatment must necessarily differ in order to be best adapted to each peculiar case. Therefore if you have any of the symptoms alluded to in this pamphlet, consult at once that physician in whose education and experience you have the most confidence, regardless of expense, and follow his advice to the very letter.

